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GOVERNOR

STATE OF MAINE
DEPARTMENT OF PUBLIC SAFETY
MAINE EMERGENCY MEDICAL SERVICES
16 EDISON DRIVE
AUGUSTA, MAINE
04330

MICHAEL F. KELLY
COMMISSIONER

JAY BRADSHAW, EMT-P
DIRECTOR

Medical Directions and Practice Board Meeting
May 20, 1998
MINUTES

Members present: Drs. Chagrasulis, Burton, Liebow, St. Pierre-Engels, Boyink, Goth

Staff: J. Bradshaw

Guests: Bill Zito, Joanne LeBrun, Liz Delano, Steve Leach, Jeff Regis

- I. Old minutes reviewed and accepted.
- II. Protocol Review - to be summarized in addendum fashion and attached to these minutes.

A. Red (Cardiac)

Discussion: Points identified which need to be addressed include:

- 1) Further education on use of chest pain checklist, stressing early use of aspirin.
- 2) Add information concerning use of prehospital 12 lead EKG's

Action: F/U:

- 1) Jay Bradshaw to rewrite protocol with proposed changes
- 2) Article in JoMEMS regarding chest pain education, early use of aspirin, decreasing time to thrombolytic therapy, etc. (John Burton)

B. Blue (Respiratory)

Discussion: Change in that albuterol nebulizer Rx's may be repeated without medical control.
Possibility of use of epi in adult protocol - need more information.

Action: F/U:

- 1) Jay Bradshaw to rewrite protocol changes as discussed.
- 2) Chagrasulis to obtain information on use of epi in adults for next meeting.

III. Southern Maine EMT-I Proposal

Discussion: Liz Delano presented draft of proposed curriculum for us of Nitro, ASA, D50 for diabetic emergencies, Albuterol, and epi-pen.

The MDPB and guests present had the following comments:

- 1) Appreciation to Liz for her thorough and hard work.
- 2) Approval of the curriculum in principle.
- 3) If adopted, should be statewide.
- 4) Number of hours suggested for training may be insufficient.
- 5) Ongoing CQI needs to be part of implementation.
- 6) Rules changes will need to be developed.
- 7) Protocol changes will need to be developed and approved by MDPB prior to implementation.
- 8) ALS back-up should be addressed at some level.
- 9) All phases of implementation and other operational issues need to be addressed prior to adoption of training.

If adopted, this level of training would be less than proposed National Standard Curriculum, and would not necessitate any significant changes is NSC adopted, except for more training if needed per NSC.

Overall, the MDPB is in favor of expanding EMT-I in this fashion, as long as issues as identified have been addressed.

Action: F/U:

No need for action or F/U by MDPB at this time. Jay Bradshaw will relay to Operations Team and Education Committee the MDPB discussion.

IV. Next Meeting - June 17, 1998, 9:30 a.m. to 12:00 p.m. at Maine EMS.

Topics to be addressed:

Protocol review: Gold (Liebow), Green (Stuchiner), Yellow (Burton), Pink (Chagrasulis).

New protocols: early identification CVA, pain control

Submitted,

Rebecca Chagrasulis, MD